

ISSUE SLIP STAPLE AREA (for additional cross references)

SITUATION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	11/9/01
FORMALITY REVIEW	DW	5C4949	11/7/01
RESPONSE FORMALITY REVIEW	HA	858	05-01-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
10	10/10/01
11	10/10/01
12	10/10/01
13	10/10/01
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49	10/10/01
50	10/10/01

Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
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